



Water Resources Program
PROOF OF APPROPRIATION OF WATER

RECEIVED

Date Stamp

JAN 25 2013

DEPARTMENT OF ECOLOGY
EASTERN REGIONAL OFFICE

Reviewed by:

PERMIT NUMBER <u>207 125</u>	CHANGE/APPROVAL NUMBER <u>TR 207</u>
NAME OF PERMITTEE <u>Sherman Maynard</u>	
CONTACT NAME (IF DIFFERENT)	
MAILING ADDRESS (STREET) <u>116 Baileysburg Rd</u>	(CITY) <u>Dayton</u>
(STATE) <u>WA</u>	(ZIP CODE) <u>99328</u>
PHONE NUMBER <u>(509) 382-2910</u>	FAX NUMBER ()

SOURCE(S) OF WATER <u>N. fork Touchet River</u>	LOCATION OF SOURCE(S)
	NO. <u>4</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$ <u>NW</u> SECTION <u>4</u> TOWNSHIP N. <u>9</u> RANGE, (E/W)M <u>39</u>
LIST ALL PURPOSES WATER IS USED FOR: <u>Water GRASS Hay Ground</u>	
DATE WATER WAS COMPLETELY APPLIED TO BENEFICIAL USE	TIME OF YEAR WATER IS USED: <input type="checkbox"/> Continuous/Year round <input checked="" type="checkbox"/> Seasonal
	IF SEASONALLY, LIST THE START AND END DATE Start: <u>6-12</u> End: <u>9-30</u>
DESCRIBE HOW CONSTRUCTION AND DEVELOPMENT RELATED PROVISIONS (AS REQUIRED BY PERMIT) HAVE BEEN OR ARE TO BE MET (USE ADDITIONAL SHEET OF PAPER IF NECESSARY)	

DESCRIPTION OF SPECIFIC AREA ON WHICH WATER IS BENEFICIALLY USED(USE ADDITIONAL SHEET OF PAPER IF NECESSARY)					
NO.	$\frac{1}{4}$ <u>NE</u>	$\frac{1}{4}$ <u>NW</u>	SECTION <u>4</u>	TOWNSHIP N. <u>9</u>	RANGE, (E/W)M <u>39</u>

PHYSICAL WITHDRAWAL OR DIVERSION INFORMATION

Point of Diversion/Withdrawal Tax Parcel #: 2009390042154

For Pump Designed Water System Information:

TYPE OF PUMP: ☐ Submersible ☐ Turbine ☒ Centrifugal ☐ Other

MAKE <u>Berkley</u>	MODEL # <u>B27 PM S</u>	SERIAL # <u>7747 659</u>	HORSEPOWER <u>7.5</u>
MOTOR <u>Century</u>	BHP	SPEED	RPM <u>3500</u>
<input type="checkbox"/> Water lubricated <input type="checkbox"/> Oil lubricated			
BOOSTER PUMP <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		BREAK HORSEPOWER	PRESSURE
PUMP DISCHARGE HEAD PRESSURE psi <u>45</u>		DISCHARGE PIPE DIAMETER <u>2"</u>	
		OPEN DISCHARGE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

For Ground Water Withdrawal (if more than one, please include attachment)

Ecology Unique Well Identification Number(s) _____ [Include a copy of the well log(s)]

PUMP SETTING (DEPTH)	STATIC WATER LEVEL feet below land surface	DYNAMIC (PUMPING) LEVEL feet below land surface
ACCESS PORT INSTALLED? <input type="checkbox"/> Yes	AIRLINE INSTALLED? <input type="checkbox"/> Yes	AIRLINE LENGTH Ft.

For Non-Pump Designed Water Systems

METHOD OF WATER DIVERSION	DESCRIPTION OF WORKS
	SCREEN MESH SIZE METHOD OF CONTROL

Accept: P.A. / no field exam req'd
Chkd By: OT Date: 2/4/2013

USE OF WATER FOR:

1. Irrigation (Please include map of all irrigated lands):

TYPE OF SYSTEM <u>Pressurized Hand Line</u>	NUMBER OF SPRINKLERS OR EMMITTERS <u>15</u>	SPRINKLER/EMMITER MAKE <u>Reinbird</u>	MODEL & RATED DISCHARGE <u>#30</u>
SIZE NOZZLE/EMMITER OPENINGS <u>1/8"</u>	AVERAGE PRESSURE AT SPRINKLER/EMMITER HEADS <u>N.A.</u>	NUMBER OF ACRES DEVELOPED <u>4</u>	TYPE OF CROP(S) <u>Grass Hay</u>

2. Municipal or Domestic Supply

NUMBER OF DOMESTIC UNITS CURRENTLY SERVED:	NUMBER OF DOMESTIC UNITS TO BE SERVED	POPULATION CURRENTLY SERVED
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ALSO, provide the following information, if applicable:

- ☐ Department of Health public water system identification number.
- ☐ Map of the delivery system (provide copy if water system is done)
- ☐ Map of present service area and lots presently using water (Non-Municipal Users).
- ☐ If platted property, provide copy of the file plat map or file reference number Non-Municipal Users).
- ☐ Other incidental beneficial uses associated with the domestic supply (Non-Municipal Users).

3. Industrial or Commercial

TYPE OF INDUSTRY OR COMMERCIAL PROCESS
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If a waste discharge permit is required for the facility, include a reference to the permit number _____

4. Other Use of Water (describe): _____

WATER USE AND *MEASUREMENT

IS A FLOW METER OR MEASURING DEVICE INSTALLED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	LOCATION OF METER(S) OR MEASURING DEVICE(S) <u>At Pump</u>		
MAKE <u>Sea Metrics</u>	SERIAL NUMBER <u>11070114</u>	INSTALLATION DATE <u>10-30-09</u>	INSTALLED BY: <u>Dunning Irrigation</u>
METER READING <u>12.367</u>	DATE <u>9-23-12</u>		

*Include copy of meter specifications

Actual amount withdrawn or diverted from permanent system on an instantaneous and annual basis. Please include meter data or describe method used to estimate annual volume.

CUBIC FEET PER SECOND	ACRE FEET PER YEAR <u>9.176</u>	GALLONS PER MINUTE <u>48</u>	TOTAL GALLONS PER YEAR <u>2989797.528</u>
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If the existing water use as indicated by meter data, etc., is less than you anticipate to be the full extent of the water right which you are reporting through submission of this form, please explain on a separate sheet.

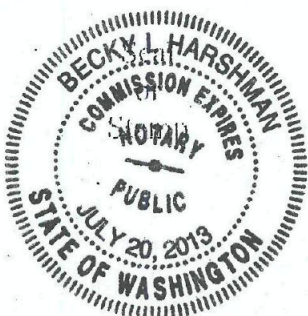
I, Sherman Maynard, do certify that I have completed appropriation of water under Water Right Permit or approved water right change number, 207. This notice and attached documents are true and accurate statements and describe and support my assertion that I have satisfied the terms of the permit/change in compliance with the law.

Sherman Maynard
Permittee(s) Signature

1-23-13
Date

State of Washington
County of Columbia

Signed and sworn to (or affirmed) before me on 1-23-13 by Sherman Maynard



Becky L Harshman
(Signature)
Notary
(Title)

My appointment expires 7-20-2013